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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/587,437	
	Filing Date		(Int'l) May 22, 2006	
	First Named Inventor		Vladimir SLEPUSHKIN	
	Title	TRANSDUCTION OF PRIMARY CELLS		
	Art Unit	Not Yet Assigned		
	Examiner Name	Not Yet Assigned		
Attorney Docket No.		397272001500		

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 59776

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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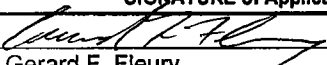
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	06/11/08
Name	Gerard F. Fleury	Telephone	501.987.0480 ext 238
Title and Company			
Executive Vice President & Chief Financial Officer VIRXSYS CORPORATION			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.